

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Exchange Contractors State PAC			<b>Date of This Filing</b> 11/03/2022	Date Stamp       Page 1 of 2	<div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">                     CALIFORNIA FORM 497                 </div> For Official Use Only
<b>AREA CODE/PHONE NUMBER</b> (559)266-3453	<b>I.D. NUMBER</b> (if applicable) 1268631	<b>Report No.</b> 2021-LCR-003			
<b>STREET ADDRESS</b>					
<b>CITY</b> Fresno	<b>STATE</b> CA	<b>ZIP CODE</b> 93721-2924			
			<input type="checkbox"/> <b>Amendment to Report No.</b> _____ (explain below)		
			<b>No. of Pages</b> 2		

## Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

### \*Contributor Codes

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment:

# Late Contribution Report

Type or print in ink.  
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

<b>NAME OF FILER</b> Exchange Contractors State PAC			<b>Date of This Filing</b> <u>11/03/2022</u>  <b>Report No.</b> <u>2021-LCR-003</u>  <input type="checkbox"/> <b>Amendment to Report No.</b> _____ <small>(explain below)</small>  <b>No. of Pages</b> <u>2</u>	Date Stamp    Page 2 of 2	<b>CALIFORNIA FORM 497</b> For Official Use Only
AREA CODE/PHONE NUMBER (559)266-3453	I.D. NUMBER (if applicable) 1268631				
STREET ADDRESS					
CITY Fresno	STATE CA	ZIP CODE 93721-2924			

## Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)
11/03/2022	Soria for Assembly 2022 Sacramento, CA 95815-4404  ID# 1443835	Esmeralda Soria State Assembly District 27 Jurisdiction: State Assembly District	\$2,500.00	11/08/2022
11/03/2022	Juan Alanis for Assembly 2022 Modesto, CA 95337  ID# 1445119	Juan Alanis State Assembly Jurisdiction: State Assembly District	\$2,500.00	11/08/2022
11/03/2022	Melissa Hurtado for State Senate 2022 Sacramento, CA 95815-4404  ID# 1414453	Melissa Hurtado State Senate District 16 Jurisdiction: State Senate District	\$2,500.00	11/08/2022
11/03/2022	Anna Caballero for Senate 2022 Fresno, CA 93710  ID# 1414451	Anna Caballero State Senate District 14 Jurisdiction: State Senate District	\$4,900.00	11/08/2022

Reason for Amendment: